$U.S. Department of Housing and Urban Development\\ Office of Public and Indian Housing$ 

Small PHA Plan Update

ND049

Walsh County Housing Authority (WCHA)

Annual Plan for Fiscal Year 2003

ShelleyPopiel,ExecutiveDirector WalshCountyHousingAuthority 600E.9 <sup>th</sup>St. Grafton,ND58237

NOTE: THISPHAPLANSTEMPLATE (HUD50075) ISTOBECOMPLETEDIN ACCORDANCE WITHINSTRUCTIONS LOCATEDINAPPLICABLE PIHNOTICES

HUD50075

OMB Approval No: 2577-0226 Expires: 03/31/2002

## WCHA2002AnnualPlan AgencyIdentification

PHAName: WalshCountyHousingAuthority

**PHANumber:** ND049

PHAFiscalYearBeginning:(mm/yyyy) 01-01-03

#### PHAPlanContactInformation:

Name:ShelleyPopiel,ExecutiveDirector

Phone:701-352-3260

TDD:

Email(ifavailable):wcha@polarcomm.com

#### **PublicAccesstoInformation**

In formation regarding any activities outlined in this plane anbeobtained by contacting: (select all that apply)

X MainadministrativeofficeofthePHA PHAdevelopmentmanagementoffices

### Display Locations For PHAP lans and Supporting Documents

The PHAP lans (including attachments) are available for public inspection at: (select all that apply)

X MainadministrativeofficeofthePHA

PHAdevelopmentmanagementoffices

X Mainadministrativeofficeofthelocal, county or Stategovernment

Publiclibrary

**PHAwebsite** 

Other(listbelow)

PHAPlanSupportingDocumentsareavailableforinspectionat:(selectallthatapply)

X MainbusinessofficeofthePHA

PHAdevelopmentmanagementoffices

Other(listbelow)

#### PHAProgramsAdministered:

PublicHousingandSection8 XSection8Only PublicHousingOnly

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# WCHAAnnualPlan FiscalYear2002

[24CFRPart903.7]

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Attachment N: Certification by State or Local Official of PHAP lan47

#### ii.ExecutiveSummary

[24CFRPart903.79(r)]

At PHA option, provide a briefover view of the information in the Annual Planck of the provided provided by the provided provid

With the assistance of the Board of Commissioners, our participants and the administrative staff of the Housing Authority, we have assembled the Housing Authority of Walsh County 's Annual Plan. The Planad dresses all of the statutory components as required by the Department of Housing and Urban Development (HUD). In keeping with its mission, the Housing Authority will work towards full utilizing all funds available to the Authority so as to maximize the results in an environment of limited funding. This Plan was assembled using the most current information available from MTCS (Multifamily Tenant Characteristics System), PIC (Public and Indian Housing Information Center), the U.S. Census Bureau, CHAS (Comprehensive Housing Affordability Strategy), and North Dakota 's Consolidated Plan for Walsh County and does not reflect any changes of availability of funding by HUD.

ThisPlanrequiredthatwetakeadetailedlookattheHousingAuthorityanddeterminewherewe are,wherewewanttobeandhowwearegoingtogetthere.TheresultsofthisAuthority-wide analysiswerenotsurprising,aswehaveaddressedmanyofthecomponentsinthepast.

Twoconclusions can be drawn from the results of the analysis. First, there is an immediate need for safe, affordable elderly and handica paccessible housing units in Walsh county. Secondly, Walsh County Housing Authority will develop and maintain an etworking system throughout the County to assist tenants in identifying services available to meet their needs and provide crime-free and safehousing.

WalshCountyHousingwillcontinuetostrivetomeetthehousingneedsofcountyresidentsbyuse ofthelocalpreferences.Adefinitionoflocalpreferencesisasfollows:

Elderly, disabled applicants are first priority Families are second priority Singles are third priority

WalshCountyHousingAuthority 'sAnnualandFiveYearPlanareconsistentwiththeNorth DakotaConsolidatedPlan.

Lastly, the Housing Authority of Walsh County will continue to down at wedobest; providing safe, affordable housing to low-incomeres idents through the provision of financial assistance programs, supportive services, and effective management.

## ${\bf 1. Summary of Policy or Program Changes for the Upcoming Year}$

In this section, briefly describe changes in policies or programs discussed in last year sections of this Update.

'sPHAPlanthatarenotcoveredinother

Nochanges.

2.CapitalImprovementNeeds **NotApplicable** 

[24CFRPart903.79(g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

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A. YesNo: IsthePHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan? B.WhatistheamountofthePHA 'sestimatedoractual(ifknown)CapitalFundProgramgrantfor theupcomingyear?\$\_ C.YesNo DoesthePHAplantoparticipateintheCapitalFundProgramintheupcoming year?Ifyes,completetherestofComponent7.Ifno,skiptonextcomponent. D.CapitalFundProgramGrantSubmissions (1)CapitalFundProgram5-YearActionPlan TheCapitalFundProgram5-YearActionPlanisprovidedasAttachment (2)CapitalFundProgramAnnualStatement The Capital Fund Program Annual Statement is provided as Attachment3.Demolition and Disposition **NotApplicable** [24CFRPart903.79(h)] Applicability: Section8 only PHAs are not required to complete this section. 1.YesNo: DoesthePHAplantoconductanydemolitionordispositionactivities

1.YesNo: DoesthePHAplantoconductanydemolitionordispositionactivities (pursuanttosection18oftheU.S.HousingActof1937(42U.S.C.1437p))intheplanFiscal Year?(If "No",skiptonextcomponent;if "yes",completeoneactivitydescriptionforeach development.)

2. Activity Description

Demolition/DispositionActivityDescription
(Notincluding Activities Associated with HOPEV Ior Conversion Activities)
1a.Developmentname:
1b.Development(project)number:
2.Activitytype:Demolition
Disposition
3.Applicationstatus(selectone)
Approved
Submitted, pending approval
Plannedapplication
4.Dateapplicationapproved, submitted, or planned for submission: (DD/MM/YY)
5.Numberofunitsaffected:
6.Coverageofaction(selectone)
Partofthedevelopment
Totaldevelopment
7.Relocationresources(selectallthatapply)
Section8forunits
Publichousingforunits
Preferenceforadmissiontootherpublichousingorsection8
Otherhousingforunits(describebelow)

8. Timeline for activity:

- a. Actualorprojectedstartdateofactivity:
- b. Actualorprojectedstartdateofrelocationactivities:

c.Projectedenddateofactivity:

7

## 4. Voucher Homeownership Program

[24CFRPart903.79(k)]

X No: A.Yes DoesthePHAplantoadministeraSection8Homeownershipprogram pursuanttoSection8(y)oftheU.S.H.A.of1937,asimplementedby24CFRpart982?(If "No". skiptonextcomponent;if "yes",describeeachprogramusingthetablebelow(copyandcomplete questionsforeachprogramidentified.)

#### B.CapacityofthePHAtoAdministeraSection8HomeownershipProgram

ThePHAhasdemonstrateditscapacitytoadministertheprogramby(selectallthatapply):

Establishingaminimumhomeownerdownpaymentrequirementofatleast3percentand requiring that at least 1 percent of the downpayment comes from the family Requiringthatfinancingforpurchaseofahomeunderitssection8homeownershipwillbe provided, insured or guaranteed by the state or Federal government; comply with secondary mortgagemarketunderwritingrequirements;orcomplywithgenerallyacceptedprivatesector underwritingstandards

Demonstratingthatithasorwillacquireotherrelevantexperience(listPHAexperience, oranyotherorganizationtobeinvolvedanditsexperience, below):

5.SafetyandCrimePrevention:PHDEPPlan	<b>NotApplicable</b>
[24CFRPart903.7(m)] ExemptionsSection8OnlyPHAsmayskiptothenextcomponentPHAseligib PHDEPPlanmeetingspecifiedrequirementspriortoreceiptofPHDEPfunds	
YesNo:IsthePHAeligibletoparticipateinthePHDEPinthefisca Plan?	alyearcoveredbythisPHA
B.WhatistheamountofthePHA 'sestimatedoractual(ifknoyear?\$	own)PHDEPgrantfortheupcoming
C.YesNo DoesthePHAplantoparticipateinthePHE answerquestionD.Ifno,skiptonextcomponent.	DEPintheupcomingyear?Ifyes,
D.YesNo:ThePHDEPPlanisattachedatAttachment	
6.OtherInformation	

#### Resident Advisory Board (RAB) Recommendations and PHAR esponse

- X No:DidthePHAreceiveanycommentsonthePHAPlanfromtheResident 1.Yes AdvisoryBoard/s?
- 2. If yes, the comments are Attached at Attachment (Filename)
- 3.InwhatmannerdidthePHAaddressthosecomments?(selectallthatapply) ThePHAchangedportionsofthePHAPlaninresponsetocomments Alistofthesechangesisincluded 8

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YesNo:belowor	
YesNo:attheendofthel	RABCommentsinAttachment
Considered comments, but dete	erminedthatnochangestothePHAPlanwere
necessary.AnexplanationofthePHA	's consideration is included at the at the end of the RAB
CommentsinAttachment	
Other:(listbelow)	

#### B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

- 1. Consolidated Planjuris diction: Consolidated Planfor North Dakota Fiscal Years 2000-2005 Region IV
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply) **SEEATTACHMENTN** 
  - $\underline{X}$  The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plans.

The PHA has participated in any consultation processor ganized and offered by the Consolidated Planagency in the development of the Consolidated Plana.

The PHA has consulted with the Consolidated Planagency during the development of this PHA Plan.

 $\underline{X}$  Activities to be under taken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)

Other:(listbelow)

#### PHARequestsforsupportfromtheConsolidatedPlanAgency

Yes  $\underline{X}$  No:DoesthePHArequestfinancialorothersupportfromtheStateorlocal governmentagencyinordertomeettheneedsofitspublichousingresidentsorinventory?Ifyes, pleaselistthe5mostimportantrequestsbelow:

4. The Consolidated Planofthejuris diction supports the PHAP lanwith the following actions and commitments: (describe below)

WalshCountyHousingAuthoritywillcontinuetostrivetoassistlowincomefamilieswith rentalassistanceinourjurisdiction.

#### C. Criteria for Substantial Deviation and Significant Amendments

AmendmentandDeviationDefinitions

24CFRPart903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Planand Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plant of ull public hearing and HUD review before implementation.

#### A.SubstantialDeviationfromthe5-yearPlan:

None.

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## B. Significant Amendmentor Modification to the Annual Plan:

None.

## <u>AttachmentA</u> SupportingDocumentsAvailableforReview

PHAsaretoindicatewhichdocumentsareavailableforpublicreviewbyplacingamarkinthe "Applicable&OnDisplay "columnin theappropriaterows.AlllisteddocumentsmustbeondisplayifapplicabletotheprogramactivitiesconductedbythePHA."

	ListofSupportingDocumentsAvailableforReview	1
Applicable & OnDisplay	SupportingDocument	RelatedPlan Component
X	PHAPlanCertificationsofCompliancewiththePHAPlansand RelatedRegulations	5YearandAnnual Plans
X	State/LocalGovernmentCertificationofConsistencywiththe ConsolidatedPlan(notrequiredforthisupdate)	5YearandAnnual Plans
X	FairHousingDocumentationSupportingFairHousing Certifications: RecordsreflectingthatthePHAhasexaminedits programsorproposedprograms,identifiedanyimpedimentsto fairhousingchoiceinthoseprograms,addressedorisaddressing thoseimpedimentsinareasonablefashioninviewoftheresources available,andworkedorisworkingwithlocaljurisdictionsto implementanyofthejurisdictions 'initiativestoaffirmatively furtherfairhousingthatrequirethePHA 'sinvolvement.	5YearandAnnual Plans
X	HousingNeedsStatementoftheConsolidatedPlanforthe jurisdiction/sinwhichthePHAislocatedandanyadditional backupdatatosupportstatementofhousingneedsinthe jurisdiction	AnnualPlan: HousingNeeds
X Mostrecentboard housingprogram PublicHousingAc (A&O/ACOP),wi		AnnualPlan: FinancialResources
	PublicHousingAdmissionsand(Continued)OccupancyPolicy (A&O/ACOP),whichincludestheTenantSelectionand AssignmentPlan[TSAP]	AnnualPlan: Eligibility,Selection, andAdmissions Policies
	AnypolicygoverningoccupancyofPoliceOfficersinPublic Housing checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan: Eligibility,Selection, andAdmissions Policies
X	Section8AdministrativePlan	AnnualPlan: Eligibility,Selection, andAdmissions Policies
	Publichousingrentdeterminationpolicies,includingthemethod forsettingpublichousingflatrents checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Rent Determination

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	Scheduleofflatrentsofferedateachpublichousingdevelopment checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Rent Determination
X	Section8rentdetermination(paymentstandard)policies XcheckhereifincludedinSection8AdministrativePlan	AnnualPlan:Rent Determination
	Publichousingmanagementandmaintenancepolicydocuments, includingpoliciesforthepreventionoreradicationofpest infestation(includingcockroachinfestation)	AnnualPlan: Operationsand Maintenance
	ResultsoflatestbindingPublicHousingAssessmentSystem (PHAS)Assessment	AnnualPlan: Managementand Operations
	Follow-upPlantoResultsofthePHASResidentSatisfaction Survey(ifnecessary)	AnnualPlan: Operationsand Maintenanceand CommunityService& Self-Sufficiency
X	ResultsoflatestSection8ManagementAssessmentSystem (SEMAP)	AnnualPlan: Managementand Operations
	AnyrequiredpoliciesgoverninganySection8specialhousing types checkhereifincludedinSection8AdministrativePlan	AnnualPlan: Operationsand Maintenance
	Publichousinggrievanceprocedures checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Grievanc Procedures
X	Section8informalreviewandhearingprocedures  XcheckhereifincludedinSection8AdministrativePlan	AnnualPlan: GrievanceProcedures
	TheHUD-approvedCapitalFund/ComprehensiveGrantProgram AnnualStatement(HUD52837)foranyactivegrantyear	AnnualPlan:Capital Needs
	MostrecentCIAPBudget/ProgressReport(HUD52825)forany activeCIAPgrants	AnnualPlan:Capital Needs
	ApprovedHOPEVIapplicationsor,ifmorerecent,approvedor submittedHOPEVIRevitalizationPlans,oranyotherapproved proposalfordevelopmentofpublichousing	AnnualPlan:Capital Needs
	Self-evaluation, Needs Assessment and Transition Planrequired by regulations implementing § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH99-52 (HA).	AnnualPlan:Capital Needs
	Approvedorsubmittedapplicationsfordemolitionand/or dispositionofpublichousing	AnnualPlan: Demolitionand Disposition
	Approvedorsubmittedapplicationsfordesignationofpublic housing(DesignatedHousingPlans)	AnnualPlan: DesignationofPublic Housing
	Approvedorsubmittedassessmentsofreasonablerevitalization of publichousing and approvedorsubmitted conversion plans prepared pursuant to section 202 of the 1996 HUDA ppropriations Act, Section 22 of the USH ousing Act of 1937, or Section 33 of the USH ousing Act of 1937	AnnualPlan: ConversionofPublic Housing
	Approvedorsubmittedpublichousinghomeownership programs/plans	AnnualPlan: Homeownership

	PoliciesgoverninganySection8Homeownershipprogram	AnnualPlan:
	(sectionoftheSection8AdministrativePlan)	Homeownership
X	CooperationagreementbetweenthePHAandtheTANFagency andbetweenthePHAandlocalemploymentandtrainingservice agencies	AnnualPlan: CommunityService& Self-Sufficiency
	FSSActionPlan/sforpublichousingand/orSection8	AnnualPlan: CommunityService& Self-Sufficiency
	Section3documentationrequiredby24CFRPart135,SubpartE	AnnualPlan: CommunityService& Self-Sufficiency
	Mostrecentself-sufficiency(ED/SS,TOPorROSSorother residentservicesgrant)grantprogramreports	AnnualPlan: CommunityService& Self-Sufficiency
	ThemostrecentPublicHousingDrugEliminationProgram (PHEDEP)semi-annualperformancereport	AnnualPlan:Safety andCrimePrevention
	PHDEP-relateddocumentation:  Baselinelawenforcementservicesforpublichousing developmentsassistedunderthePHDEPplan;  Consortiumagreement/sbetweenthePHAs participatingintheconsortiumandacopyofthepayment agreementbetweentheconsortiumandHUD(applicableonly toPHAsparticipatinginaconsortiumasspecifiedunder24 CFR761.15);  Partnershipagreements(indicatingspecificleveraged support)withagencies/organizationsprovidingfunding, servicesorotherin-kindresourcesforPHDEP-funded activities;  Coordinationwithotherlawenforcementefforts;  Writtenagreement(s)withlocallawenforcement agencies(receivinganyPHDEPfunds);and  Allcrimestatisticsandotherrelevantdata(including PartIandspecifiedPartIIcrimes)thatestablishneedforthe publichousingsitesassistedunderthePHDEPPlan.	AnnualPlan:Safety andCrimePrevention
	PolicyonOwnershipofPetsinPublicHousingFamily Developments(asrequiredbyregulationat24CFRPart960, SubpartG) checkhereifincludedinthepublichousingA&OPolicy	PetPolicy
X	TheresultsofthemostrecentfiscalyearauditofthePHA conductedundersection5(h)(2)oftheU.S.HousingActof1937 (42U.S.C.1437c(h)),theresultsofthatauditandthePHA 's responsetoanyfindings	AnnualPlan:Annual Audit
	TroubledPHAs:MOA/RecoveryPlan	TroubledPHAs
	Othersupportingdocuments(optional) (listindividually;useasmanylinesasnecessary)	(specifyasneeded)

Ann	ualStatement/PerformanceandEvalu	ationReport			
	ital Fund Program and Capital Fund Properties for the state of the s	_	tHousingFactor(C	FP/CFPRHF)Par	t1:
	maryNOTNotAp	ogrammie pracemen	con (C.	11,0111111111111111	
PHAN		GrantTypeandNumber			FederalFYofGrant:
PHAN	ame:	• •		Federalf YolGrant:	
		CapitalFundProgram:			
		CapitalFundProgram			
		ReplacementHousingFactorC			<u> </u>
	nalAnnualStatementReserveforDisasters/Emergence				)
	manceandEvaluationReportforPeriodEnding:Fina	_			
Line	SummarybyDevelopmentAccount	TotalEstin	natedCost	TotalAc	tualCost
No.		0.1.1	D 1 1	0111 / 1	T 5 11
	TE ( ) CEDE 1	Original	Revised	Obligated	Expended
1	Totalnon-CFPFunds	_			
2	1406Operations				
3	1408ManagementImprovements				
4 5	1410Administration				
5	1411Audit				
6	1415liquidatedDamages				
7	1430FeesandCosts				
8	1440SiteAcquisition				
9	1450SiteImprovement				
10	1460DwellingStructures				
11	1465.1DwellingEquipment —Nonexpendable				
12	1470NondwellingStructures				
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1498ModUsedforDevelopment				
19	1502Contingency				
20	AmountofAnnualGrant:(sumoflines2-19)				
21	Amountofline20RelatedtoLBPActivities				
22	Amountofline20RelatedtoSection504			·	
	Compliance				

23	Amountofline20RelatedtoSecurity		
24	Amountofline20RelatedtoEnergyConservation		
	Measures		

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		327 minuan ranepaa	ter agerr					
AnnualState	ment/PerformanceandEvalu	ıationReport						
CapitalFund	${f Program and Capital Fund Fund Program and Capital Fund Program an$	rogramRepla	cementHo	usingFacto	or(CFP/CI	FPRHF)		
PartII:Suppo	ortingPages							
PHAName:		GrantTypeandNu	mber		_	FederalFYofG	rant:	
	CapitalFundProgram#: CapitalFundProgram							
		ReplacementHousin	ngFactor#:					
Development	GeneralDescriptionofMajorWork	Dev.AcctNo.	Quantity	TotalEstin	natedCost	TotalAct	ualCost	Statusof
Number	Categories							Proposed
Name/HA-				Original	Revised	Funds	Funds	Work
Wide						Obligate	Expende	
Activities						d	d	

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mandCap	4 - IT			AnnualStatement/PerformanceandEvaluationReport								
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)												
PartIII:ImplementationSchedule												
	Grant	ГуреandNum	ber			FederalFYofGrant:						
			n#:									
	Capital	FundProgram	ReplacementHousi	ngFactor#:								
AllFundObligated		AllFundsExpended			ReasonsforRevisedTargetDates							
(QuartEnd		e)	(QuarterEndingDate)									
riginal R	evised	Actual	Original	Revised	Actual							
	AllFund( (QuartEn	Grant. Capita Capital AllFundObligated (QuartEndingDate	GrantTypeandNum CapitalFundProgram CapitalFundProgram AllFundObligated (QuartEndingDate)	GrantTypeandNumber CapitalFundProgram#: CapitalFundProgramReplacementHousi AllFundObligated All (QuartEndingDate) (Qu	GrantTypeandNumber CapitalFundProgram#: CapitalFundProgramReplacementHousingFactor#:  AllFundObligated AllFundsExpended (QuartEndingDate) (QuarterEndingDate)	GrantTypeandNumber CapitalFundProgram#: CapitalFundProgramReplacementHousingFactor#:  AllFundObligated AllFundsExpended (QuartEndingDate) (QuarterEndingDate)						

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#### CapitalFundProgram5-YearActionPlan

#### **NotApplicable**

Complete on etable for each development in which work is planned in the next 5PHA fiscal years. Complete atable for any PHA-wide physical orman agement improvement splanned in the next 5PHA fiscal year. Copy this table as many times as necessary. Note: PHA sneed not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP5-YearAc			
Development	DevelopmentName		
Number	(orindicatePHAwide)		
	dedPhysicalImprovementsorManagement	EstimatedCost	PlannedStartDate
Improvements			(HAFiscalYear)
Totalestimatedcos	stovernext5years		

# WCHA 2002 Annual Plan Update Page 14 PHA Public Housing Drug Elimination Program Plan Not Applicable

Note: THIS PHDEP Plantemplate (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIHN otices.

- A. Amount of PHDEP Grant \$\_\_\_
- B. Eligibility type (Indicate with an "x") N1\_\_\_\_ N2\_\_\_ R\_\_\_
- C. FFY in which funding is requested.
- D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEPPlan, including highlights of major initiatives or activities under taken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long t

#### E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Populatio n to be Served within the PHDEP Target Area(s)

#### F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an For "Other", identify the #of months).

"x"toindicatethelengthofprogramby#ofmonths.

12 Months	18 Months	24 Months

#### G. PHDEP Program History

IndicateeachFYthatfundinghasbeenreceivedunderthePHDEPProgram(placean "x"byeachapplicableYear)andprovideamountoffundingreceived.Ifpreviouslyfunded programs <a href="https://havenot/beenclosedoutatthetimeofthissubmission,indicatethefundbalanceandanticipatedcompletiondate.TheFundBalancesshouldreflectthebalanceasof/DateofSubmissionofthePHDEPPlan.TheGrantTermEndDateshouldincludeanyHUD-approvedextensionsorwaivers.Forgrantextensionsreceived,place" "GE"incolumn or "W"forwaivers."

Fiscal Year of Fundi ng	PHDE P Fundi ng Receiv ed	Grant#	Fund Balance as of Date of this Submis sion	 Grant Start Date	Grant Term End Date
FY 1995					
FY 1996					

FY 1997			
FY199 8			
FY 1999			

#### WCHA 2002 Annual Plan Update Page 15 Section 2: PHDEP Plan Goals and Budget

#### A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area (s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

#### B. PHDEP Budget Summary

EnterthetotalamountofPHDEPfundingallocatedtoeachlineitem.

FFYPHDEPBud	get
Summary	

HUD50075 **OMB Approval No: 2577-0226 Expires: 03/31/2002** 

#### Originalstatement

#### Revisedstatementdated:

Keviseustatementuateu:	
BudgetLineItem	TotalFunding
9110 -ReimbursementofLawEnforcement	
9115-SpecialInitiative	
9116-GunBuybackTAMatch	
9120-SecurityPersonnel	
9130-EmploymentofInvestigators	
9140-VoluntaryTenantPatrol	
9150-PhysicalImprovements	
9160-DrugPrevention	
9170-DrugIntervention	
9180-DrugTreatment	
	1

9190-OtherProgramCosts	
TOTALPHDEPFUNDING	

#### **PHDEPPlanGoalsandActivities**

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be numbered sequentially for each budget line item. Each goal and objectives hould be not experienced by the sequential line item. Each goal and objectives hould be not experienced by the sequential line item. Each goal and objectives hould be not experienced by the sequential line item. Each goal and objectives hould be not experienced by the sequential line item. Each goal and objective hould be not experienced by the sequential line item. Each goal and the sequential line item. Eachlineitem(whereapplicable). Useasmanyrowsasnecessarytolistproposedactivities(additionalrowsmaybeinsertedinthetables). PHAsarenotrequiredtoprovide informationinshadedboxes.Informationprovidedmustbeconcise -nottoexceedtwosentencesinanycolumn.TablesforlineitemsinwhichthePHAhasnoplannedgoalsor activitiesmaybedeleted.

9110 -ReimbursementofLawEnforcement					TotalPHDEPFunding:\$			
Goal(s)								
Objectives								
ProposedActivities	#of	Target	Start	Expected	PHEDE	OtherFunding	PerformanceIndicators	
	Persons	Population	Date	Complete	P	(Amount/		
	Served			Date	Funding	Source)		
1.								
2.								
3.								

9115-SpecialInitiative					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/ Source)	PerformanceIndicators
1.							
2.							
3.							

re-		WCHA2002A	nnuaiPian	UpdatePage.	16				
9116-GunBuybackTAMatch						TotalPHDEPFunding:\$			
Goal(s)									
Objectives									
ProposedActivities	#of Persons	Target Population	Start Date	Expected Complete	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators		
	Served	Population	Date	Date	runding	(Amount/Source)			
1.									

				_					
2.									
3.									
9120-SecurityPersonnel					TotalPHDEP	Funding:\$			
Goal(s)									
Objectives									
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators		
1.					_				
2.									
3.									
9130 -EmploymentofInvesti	gators				TotalPHDEPFunding:\$				
Goal(s)									
Objectives	I								
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source			
1.	Berrea			<b>†</b>			†		
2.									
3.	1			1			1		
L.			<u>'</u>	<u></u>	<u></u>	- <u></u> -			
		WCHA2002Ar	nnualPlan	UpdatePage1	7				
9140 - VoluntaryTenantPatr	rol				TotalPHDEPFunding:\$				
Goal(s)									
Objectives	Ť								
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators		
1.	Berved	-	<b>†</b>	<u> </u>		<u> </u>	<b>—</b>		
2.	1		<b>†</b>						
3.	1		1			1			
L.			<u></u>	<u></u>	<u> </u>	<u>JL</u>	<u></u>		

9150- PhysicalImprovements

TotalPHDEPFunding:\$

Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
l.							
2.							
3.							

9160-DrugPrevention					TotalPHDEP	Funding:\$	
Goal(s)							
Objectives	T						
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

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9170-DrugIntervention					TotalPHDEPF	unding:\$	
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9180-DrugTreatment				TotalPHDEPFunding:\$			
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
	Scrveu		-		_		

1.				
2.				
3.				

9190-OtherProgramCosts				TotalPHDEPFunds:\$			
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

# AttachmentB: ResidentMemberonthePHAGoverningBoard

1.X\_YesNo: DoesthePHAgoverningboardincludeatleastonememberwho isdirectlyassistedbythePHAthisyear?(ifno,skipto#2)

Nameofresidentmember(s)onthegoverningboard: ElizabethDeSautel

Howwastheresidentboardmemberselected:(selectone)?

 $\underline{\mathbf{X}}$ Elected (by approval of Walsh County Commissioners)

Appointed

C.The term of appointment is (include the date term expires):

**2004** (3 year term)

2. A.If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain):

B. Dateofnexttermexpirationofagoverningboardmember: 2002

Name and title of appointing official (s) for governing board (indicate appointing official for the next position):

LilaMielke,Chair	TermExpires2004
DanStenvold, ViceChair	TermExpires2003
BennieLangerud	TermExpires2004
ElizabethDeSautel	TermExpires2003
JudyKeeley	TermExpires 2005

# $\label{lem:attachmentC:} Attachment C: \\ Membership of the Resident Advisory Board or Boards$

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list or ganizations represented or otherwise provide a description sufficient to identify how members are chosen.)

#### ResidentAdvisoryBoardMembers

EleanorClark ElizabethDeSautel SophieKasprick KathleenKroulik GeorgeUnger

#### Walsh County Housing Authority Board Members

1. Elizabeth(Betty)DeSautel Term: 1990-1995;1995-2000;2000-2003

600E.9 thSt.#26 Grafton,ND58237 701-352-0739

2. JudyKeeley Term:2002-2005

1518775 <sup>th</sup>St.NE Grafton,ND58237 701-352-0317

3. BennieLangerud Term: 1996-2001;2001-2004

2027MyrtleAve. POBox123 Hoople,ND58243 701-894-6120

4. LilaMielke,Chair Term: October1999-2003

1021McHughAve. Grafton,ND58237 701-352-0547 701-360-3587

5. DanStenvold, ViceChair Term: 1988-1993;1993-1998;1998-2003

125CodeAve.N. ParkRiver,ND58270 701-284-6426

EffectiveJune,2002

OMB Approval No: 2577-0226 Expires: 03/31/2002

### AttachmentD: RESIDENTADVISORYBOARDMEETING MINUTES

#### THURSDAY, AUGUST1, 2002 AT1:00P.M.

<b>Attendance:</b>	KathleenKroulik, Elizabeth De Sautel, Sophie Kasprick,
	EleanorClark,GeorgeUnger

- 1. PopielreviewedtheminutesfromthelastResidentAdvisoryBoard MeetingwhichwasheldonJuly26,2001.Noquestionsfromthe 2002ResidentAdvisoryBoardregardingtheminutes.
- 2. PopielreviewedtheSection8HousingChoiceVoucherProgram.An explanationofhowtheprogramworks,whoiseligibleforthe program,andthepaymentstandardswereexplained.
- 3. PopielreviewedtheAgencyPlanandthe5YearPlan.
- 4. PopielreviewedtherolesoftheResidentAdvisoryBoardwhichwere providedbyHUD.
- 5. PopielreviewedthegoalsforWalshCountyHousingandprovidedan updatefor2002.
- 6. PopielreviewedthebreakdownofparticipantseffectiveforAugust 2002andthehousingneedsforWalshCounty.
- 7. PopielreviewedtheSEMAPindicatorsandthe2001scoring.
- 8. Popielopenedthemeetingforanyquestionsandrecommendations.
- 9. ResidentAdvisoryBoardmembershadnorecommendationsatthis time.Allquestionswereansweredduringthemeeting.

	08-02-02	
ShelleyPopiel	Date	

## WALSHCOUNTYHOUSINGAUTHORITY

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600E.9 THST. PHONE:701-352-3260 GRAFTON,ND58237

July11,2002

ToParticipantsintheSection8RentalAssistanceProgramatWalshCountyHousing:

ManychangeshaveoccurredintheSection8RentalAssistanceProgramthatyouare currentlyaparticipant. The Quality Housing and Work Responsibility Actof 1998 (QHWRA),theDepartmentofHousingandUrbanDevelopment(HUD)mandatedeach publichousingagency(PHA)developanAgencyPlan.Throughtheseplan,aPHAwill adviseHUD, its residents and members of the public of the PHA 'smissionforservingthe needsoflow-incomeandverylow-incomefamilies, and the PHA 'sstrategyfor addressingtheseneeds.

TheplanwasdevelopedandsubmittedtoHUDlastyearwiththeassistanceofaResident AdvisoryBoard.AlsoaPublicHearingwasheldforanypublicinput.TheAgencyPlan isavailableintheWalshCountyHousingAuthorityoffice.

ThisyearanannualplanneedstobewrittenandsenttoHUDsummarizinghowwemet  $our goals this past year. To assist Walsh County Housing Authority staff and Board in {\tt Staff} and {\tt Staff} an$ thedevelopmentoftheannualplan,aResidentAdvisoryBoardmeetingisscheduledfor August1,2002at1:00p.m.atthemeetingroomatParkviewManors

Thepurpose of the Resident Advisory Boardisto assist Walsh County Housing and makerecommendations regarding the development of the Annual Plan. If you are interested in becoming a member of the Resident Advisory Board, please contact meat 352-3260orreturnthebottomsheettomeassoonaspossible.

Also, aspart of Section 511 of the QHWRA, the Board of Directors of Walsh County HousingmustconductapublichearingtodiscusstheAnnualPlanandtoinvitepublic commentregardingtheplan. The publichearing is scheduled for August5,2002at7:00 **p.m.atParkviewManors**Youarewelcometoattendthepublichearing.

Thankyouforyourtime	inthismatter.
Sincerely,	
ShelleyPopiel ExecutiveDirector WalshCountyHousing	gAuthority
_!X	Yes, Iaminterested in being a member of the Resident Advisory
	Board.

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Signature TelephoneNumber Date

WALSHCOUNTYHOUSINGAUTHORITY

!X

PHONE:701-352-3260

GRAFTON,ND58237

600E.9 THST.

FAX: 701-352-9634

# RESIDENTADVISORYBOARD

# 1:00P.M.,AUGUST1,2002

#### **AGENDA**

- Readingoflastmeeting 'sminutes. 1.
- 2. ReviewofHousingChoiceVoucherProgram (Handout).
- ReviewofAgencyPlan. 3.
- RoleofResidentAdvisoryBoardMembers 4. (Handout).
- 2002ProgressReport(Handout). 5.
- HousingNeeds(Handout). 6.
- OpenForum. 7.

WCHA2002AnnualPlanUpdatePage

#### **AttachmentE:**

#### PUBLICHEARINGMEETING MINUTES

#### MONDAY, AUGUST5, 2002 at 7:00 P.M.

**Attendance:** ElizabethDeSautel,LilaMielke,DanStenvold,Judy Keeley,BennieLangerud,KathleenKroulik

- 1. PopielreviewedtheminutesfromthePublicHearingwhichwasheld onAugust6,2001.Noquestionsfromtheattendeesatthe2002 PublicHearingregardingtheminutes.
- 2. PopielreviewedtheSection8HousingChoiceVoucherProgram.An explanationofhowtheprogramworks,whoiseligibleforthe program,andthepaymentstandardswereexplained.
- 3. PopielreviewedtheAgencyPlanandthe5YearPlan.
- 4. PopielreviewedtherolesoftheResidentAdvisoryBoardwhichwere providedbyHUDandprovidedasummaryoftheResidentAdvisory BoardmeetingwhichwasheldonAugust1,2002.
- 5. PopielreviewedthegoalsforWalshCountyHousingandprovidedan updatefor2002.
- 6. PopielreviewedthebreakdownofparticipantseffectiveforAugust 2002andthehousingneedsforWalshCounty.
- 7. PopielreviewedtheSEMAPindicatorsandthe2001scoring.
- 8. Popielopenedthemeetingforanyquestionsandrecommendations.
- 9. TherewerenocommentsorrecommendationsfromthePublic Hearingattendees.

	08-06-02	
ShelleyPopiel	Date	

# WALSHCOUNTYHOUSINGAUTHORITY

\_!X

PHONE:701-352-3260 FAX: 701-352-9634 GRAFTON,ND58237

600E.9 THST.

# **PUBLICHEARING**

# 7:00P.M.,AUGUST5,2002

### **AGENDA**

- 1. Readingoflastmeeting 'sminutes.
- 2. ReviewofHousingChoiceVoucherProgram.
- 3. ReviewofAgencyPlan.
- 4. 2002ProgressReport.
- 5. HousingNeeds.
- 6. OpenForum.

HUD50075

## WALSHCOUNTYHOUSINGAUTHORITY

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PHONE:701-352-3260 GRAFTON,ND58237 600E.9 THST.

FAX

**Date:** 07-11-2002

To: WalshCountyRecord

From: ShelleyPopiel,ExecutiveDirector

WalshCountyHousingAuthority

Fax#: 701-352-1502

Pages: 1includingthissheet

!X

PleaseputthefollowingpublicnoticeinthenexttwoWalshCountyRecords(July 17and24):

#### **NOTICEOFHEARING**

NoticeisherebygiventhattheHousingAuthorityofWalshCountywill conductaPublicHearingintheMeetingRoomatParkviewManors,600E.9 th Street,Grafton,NorthDakota,onAugust5,2002from7:00-7:30p.m.todiscuss theproposed2003AnnualPlan.Acopyoftheproposed2003AnnualPlanand AgencyPlansubmittedin2002areavailableforreviewandinspectioninthe WalshCountyHousingAuthorityOfficeat600E.9 thSt.Anypersoninterested mayappearattheHearingandbeheard.

ShelleyPopiel,ExecutiveDirector WalshCountyHousingAuthority

Thankyou.

WCHA2002AnnualPlanUpdatePage

HUD50075

OMB Approval No: 2577-0226 Expires: 03/31/2002

## AttachmentF: BoardResolution SentwithHardCopytoHUD

AttachmentF: BoardResolutionContinued SentwithHardCopytoHUD

# AttachmentG: AnnualPlan2003Update

#### **MISSIONSTATEMENT:**

The Housing Authority of Walsh County strives to provides a feand affordable housing to low-income persons in Walsh County in an environment without discrimination, create opportunities for residents's elf-sufficiency and economic independence.

#### **GOALS:**

7. FullyutilizeallSection8ContributionsavailabletothePublicHousingAuthority.

#### **OBJECTIVE:**

1. MonitorHousingAssistancePayments(HAP)monthlytoensurethatall anticipatedAnnualContributionsContract(ACC)areutilized.

#### **2002UPDATE**

- 1. WalshCountyHousingwillreceive\$308,001fromHUDfor2001(ACC). The ExecutiveDirectorwillcontinuetomonitortheHAPamountseachmonthto utilizetheACCmonthlyamountfromHUDtoitsfullextent.
- $8. \hspace{1.5cm} Attended ucationals essions on the Section 8 Rental Assistance Program. \\$

#### **OBJECTIVES:**

- 1. The Executive Director will attend 90% of the NAHRO (National Association of Housing and Redevelopment Officials) Round tables held quarterly.
- 2. The Executive Director will attend at least I workshop on management of the Section 8 Rental Assistance Program.

#### **2002UPDATE:**

- a) TheExecutiveDirectorattendedthefollowingNAHRORoundtablein2002: April17(Carrington)andplansonattendingtheSeptember11 thRoundtablein Fargo.
- b) GaveapresentationoftheSection8HousingChoiceVoucherProgramto GraftonHighSchoolLifeSkillsClassonJanuary24.
- c) The Executive Director attended the following convention: Mountain Plains NAHROAnnual Conference in Spearfish, South Dakota on July 28-30, 2002.
- d) MetwithPembinaCountyHousingandCavalierCountyHousingregarding SEMAPcertificationandconductedqualityreviewoftenantfiles.
- 3. Networkwithcounty-wideagenciestokeepabreastofservicesavailabletolow-incomepersons.

#### **OBJECTIVES:**

- a) The Executive Director will attend 90% of the Networking Committee meetings that are held the 3rd Wednesday of each month except Juneand July.
- b) The Executive Director will establish a filing system which would contain information on services and people to contact county-wide regarding child care assistance, paying for deposits, homeownership, parenting classes, etc.

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# AttachmentG: AnnualPlan2003UpdateContinued

#### **2002UPDATE:**

a) The Executive Director attended the following Network Meetings:

Jan.18-Attended.

Feb.20-Attended.

March20-Attended.

April17-AttendedNAHRORoundtableinCarrington.

May15-Attended.

NomeetingsforJuneandJuly.

Aug.21-Attending.

Sept.18-Attending.

Oct.16-Attending.

Nov.20-Attending.

Dec.18-Attending.

- b) Developedabinderofnamesandcontactpeopleandupdatedtherolodexto includecurrentphonenumbersandcontactpeople.
- c) AttendedOptionsResourceCenterforIndependentLivingStrategicPlanning DayonAugust15,2002attheEastGrandForks,MinnesotaVFW.

#### 4. Developandsupportsafeandcrime-freehousing.

#### **OBJECTIVES:**

- d) Workwithlandlordsandresidentsfortheirsupportandinput.
- e) Developapartnershipwithlocallawenforcementagenciestopromotesafe, crime-freehousing.
- f) AmendAdministrativePlantoallowforscreeningofapplicantsfordrugand criminalactivity.

#### **2002UPDATE:**

- a) The Executive Director developed a quarterly news letter which will sent to land lords to update the moncurrent policies and changes from HUD. A Resident Advisory Boardhas been created to inform participants of changes which would affect them.
- b) AnagreementhasbeenreachedforWalshCountyHousingtoreceivecriminal backgroundchecksonallapplicantsandparticipants.Aformwasdeveloped whichisusedtorequestthecriminalbackgroundinformation.

The Housing Authority of Walsh County will carry out activities and items listed in this Planin compliance with all applicable civil rights requirements and that the Housing Authority will affirmatively further fairhousing.

AttachmentH: OrganizationalChart SentwithHardCopytoHUD

#### **AttachmentI:**

# HousingNeeds SentwithHardCopytoHUD

UponreviewingthedataavailablethroughMTCS(MultifamilyTenantCharacteristics Systems),PIC(PublicandIndianHousingInformationCenter),theU.S.CensusBureau, CHAS(ComprehensiveHousingAffordabilityStrategy),andNorthDakota 's ConsolidatedPlanforWalshCounty,WalshCountyHousingwillcontinuetostriveto meetthehousingneedsofcountyresidentsbyuseofthelocalpreferences.Adefinition oflocalpreferencesisasfollows:

Elderly, disabled applicants are first priority Families are second priority Singles are third priority

If there are no elderly or disable dapplicants, then the next name on the family waiting list will be offered a voucher. If there are no elderly, disabled, or family applicants, then the next name on the one person household waiting list will be offered a voucher. When an elderly or disable dapplication is received, they automatically go the top of the waiting list over families and singles. When a family applies for housing assistance, they will be offered a voucher before a single household.

When the waiting list gets very low, articles will be run in the Walsh County Record informing the public of the Section 8 Rental Assistance Program. A radio adwith KXPO Radio Station will also be run.

OMB Approval No: 2577-0226 Expires: 03/31/2002

## WALSHCOUNTYHOUSINGAUTHORITY

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PHONE:701-352-3260 GRAFTON,ND58237 600E.9 THST.

# RENTALASSISTANCEPROGRAM SECTION8EXISTINGHOUSING

#### WHATISTHERENTALASSISTANCEPROGRAM?

It is the mission of the Housing Authority of Walsh County to strive to provide safe, affordable housing to low-income persons in Walsh County in an environment without discrimination, create opportunities for residents' self-sufficiency and economic independence.

The Section 8 tenant-based program is designed to increase the housing choices available to very low-incomehouseholdsbymakingprivatelyownedrentalhousingaffordabletothem. Themain wayitaccomplishesthisisbyprovidingfundingtolocalpublichousingagencies(WalshCounty Housing)sothattheymayproviderentalvoucherstoqualifiedverylow-incomehouseholds. Newrentalassistancewillbeprovidedentirelybyvouchers. Theserentalvouchersproviderent subsidies that generally equal the difference between 30% of the household 'sadjustedincome and the Walsh County Housing-approved payments tandard. Under the Housing Choice Voucher Programafamilymayselectamoreexpensiveunit, with a grossrent that exceeds the Walsh CountyHousing 'spaymentstandard,butthefamilymustpaytheadditionalamount.Thelaw restricts a voucher-holder, however, from renting a unit that would initially require the family to paymorethan40% of the family 'sadjustedvoucherforrent. The subsidies are paid directly to thelandlordbyWalshCountyHousing.Section8rentalvoucherfundingisusedfortenantbasedassistance. Tenant-basedassistance can be provided for any eligiblerentalunit, aslongas thelandlordagreestoparticipateintheprogram.AllSection8voucherunitsmustbeinspected by Walsh County Housing to ensure their compliance with HUDhousing quality standards.

#### WHOISELIGIBLEFORTHEPROGRAM?

The program will assist participants without regard to race, color, national origin, religion, creed, sex, age, or handicap. Grossfamily income cannot exceed the following limits:

FamilySize:	1person	IncomeLimit:	\$16,050Effective12-01-01
	2persons		\$18,350
	3persons		\$20,650
	4persons		\$22,950
	5persons		\$24,800
	6persons		\$26,600
	7persons		\$28,450
	8persons		\$30,300

Income includes all monies that a family receives from any source. When a family 's total assets exceed \$5,000, the WCHA will determine the greater of 10% of the total assets or actual interest income earned and additto the gross income to determine eligibility.

Incases of childcustody, the family member must have at least 50% physical custody of the children and provided ocumentation to verify the custody. Verification of pregnancy and disability are also required.

#### WHATSIZEUNITAMIELIGIBLEFOR?

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HUD50075

TheunitsizewillbedeterminedbytheWCHA,dependingonthesex,age,andnumber of persons in the household. A family is allowed to renta smaller or larger unit under certain conditions.

#### WHATTYPEOFHOUSINGWILLQUALIFY?

Rental assistance can be used in any type of privately owned rental housing in Walsh Countyhouses, duplexes, apartments, and mobile homes. The dwelling units elected by the family must be in spected in accordance with the Housing Quality Standards (HQS) and be certified as decent, safe, and rentre a sonable by the WCHA.

#### WAITINGLIST

Awaitinglistisestablishedaccordingtolocalpreferenceanddateofapplication. Elderly and disabled applicants have preference overfamilies. Families have preference oversingle applicants.

#### WHATARETHEMAXIMUMRENTSALLOWEDFORTHEPROGRAM?

Under this program, total housing costs (rent and tenant paid utilities) cannot exceed the following payments tandards asset by the U.S. Department of Housing and Urban Development.

BedroomSize:		EffectiveOct.2001	EffectiveOct.2002
	0bedroom	\$318	\$329
	1bedroom	\$340	\$350
	2bedrooms	\$422	\$435
	3bedrooms	\$528	\$545
	4bedrooms	\$591	\$610
	5bedrooms	\$680	\$702
	6bedrooms	\$769	\$794

If the tenantis responsible for any or all of the utilities, an amount specified by the WCHA from a utility allowances chedule must be added to the rent to determine if it is within the payment standard limits.

#### HOWMUCHRENTDOPROGRAMPARTICIPANTSPAY?

The grossfamily contribution (GFC) is the amount of rent the client pays toward the housing costs. GFC is figured at 30% of the monthly income after allowances for minor children and child careductoemployment. In the case of elderly or disable dindividuals, medical expenses in excess of 3% of the grossfamily income are allowable deductions.

#### HOWDOESTHEPROGRAMWORK?

- 1. The family completes an application with the WCHA. If the family is determined to be eligible, the family is placed on the appropriate waiting list.
- 2. Whenassistancebecomesavailable,thefamilyisnotifiedbymailandanintake appointmentisscheduled.
- 3. Aftertheeligibilityandincomecertificationiscompleted, avoucherisis suedand the family begins ahousing search.
- 4. Thefamilysignsarequestforleaseapprovalwithlandlord.
- 5. The WCHA inspects the unit.
- 6. If the unit passes the HQS in spection, is within fairmark etrent limits and is determined to be rentreasonable, the tenant and landlord enterinto a WCHA approved lease.
- 7. Annuallythefamilyisreviewedforcontinuedeligibilityandtheunitisreinspected.

Revised August23,2002

# WALSHCOUNTYHOUSINGAUTHORITY



PHONE:701-352-3260 GRAFTON,ND58237 600E.9 THST.

#### **88PARTICIPANTS**

#### ASOFAUGUST1,2002

#### **FamilialStatus:**

Families		35	40%
Elderly	24	27%	
Disabled		22	25%
Single		7	8%

#### **BedroomSize:**

1Bedroom	34	39%
2Bedrooms	30	34%
3Bedrooms	20	23%
4Bedrooms	3	3%
5Bedroom	1	1%

#### Race:

White	86	98%
NativeAmerican	2	2%

## **Ethnicity:**

NonHispanic	81	92%
Hispanic	7	8%

## City:

Edinburg		1	1%
Grafton		71	81%
Hoople	6	7%	
Minto		1	1%
ParkRiver		9	10%

August23,2002

# WALSHCOUNTYHOUSINGAUTHORITY

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PHONE:701-352-3260 GRAFTON,ND58237 600E.9 THST.

# SECTION8VOUCHERPROGRAM PAYMENTSTANDARD EFFECTIVEOCTOBER1,2001

BEDROOMSIZE RENT(INCLUDESUTILITIE			
0	\$318		
1	\$340		
2	\$422		
3	\$528		
4	\$591		
5	\$680		
6	\$769		

## **EFFECTIVEOCTOBER1,2002**

BEDROOMSIZE	RENT(INCLUDESUTILITIES)	
0	\$329	
1	\$350	
2	\$435	
3	\$545	
4	\$610	
5	\$702	
6	\$794	

August23,2002

# AttachmentJ: CivilRightsCertification SentwithHardCopytoHUD

The Walsh County Housing Authority does here by agree and certify that it will carry out this Annual Planin compliance with all applicable civil rights requirements and will affirmatively further fairhousing. In particular, we will comply with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 502 of the Rehabilitation Act of 1973, and title II of the American swith Disabilities Act of 1990.

ExecutiveDirector		
Date		

Expires: 03/31/2002

# AttachmentK: CertificationforaDrug-FreeWorkplace SentwithHardCopytoHUD

OMB Approval No: 2577-0226 Expires: 03/31/2002

# $\label{lem:attachmentL:} AttachmentL: \\ Certification of Payment to Influence Federal Transactions \\ Sent with Hard Copyto HUD$

# AttachmentM: DisclosureofLobbyingActivities SentwithHardCopytoHUD

OMB Approval No: 2577-0226 Expires: 03/31/2002

# AttachmentN: CertificationbyStateorLocalOfficial ofPHAPlansConsistencywiththeConsolidatedPlan SentwithHardCopytoHUD